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## FAX TRANSMISSION

DATE: August 20, 2007

PTO IDENTIFIER: Application Number 10/667,129-Conf. #7169

Inventor: Allen Fox et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: DARBY &amp; DARBY P.C.

Thomas R. Marquis

PHONE: (206) 262-8900

Attorney Dkt. #: 08226/1203097-US1

PAGES (Including Cover Sheet): 10

CONTENTS: Certificate of Transmission (1 pg.)  
Transmittal (1 pg.)  
Fee Transmittal (1 pg.)  
Petition for Extension of Time (1 pg.)  
Notice of Appeal (1 pg.)  
Pre-Appeal Brief Request for Review (1 pg.)  
Reasons for Pre-Appeal Brief Request for Review (3 pgs.)

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Application No. (if known): 10/667,129

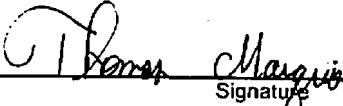
Attorney Docket No.: 08226/1203097-US1

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Transmittal (1 pg.)

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Petition for Extension of Time (1 pg.)

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FORM

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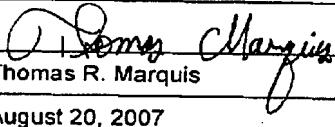
TRANSMITTAL FORM		Application Number	10/667,129-Conf. #7169
		Filing Date	September 16, 2003
		First Named Inventor	Allen Fox
		Art Unit	3621
		Examiner Name	P. E. Elisca
Total Number of Pages in This Submission	9	Attorney Docket Number	08226/1203097-US1

## ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Transmission (1 pg.) Pre-Appeal Brief Request for Review (1 pg.) Reasons for Pre-Appeal Brief Request for Review (3 pgs.)
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Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature			
Printed name	Thomas R. Marquis		
Date	August 20, 2007	Reg. No.	46,900

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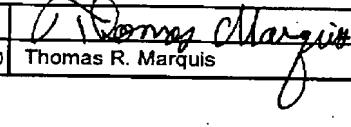
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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2007</b>		Application Number	10/667,129-Conf. #7169
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	September 16, 2003
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Allen Fox
620.00		Examiner Name	P. E. Elisca
		Art Unit	3621
		Attorney Docket No.	08226/1203097-US1

<b>METHOD OF PAYMENT</b> (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input type="checkbox"/> Credit any overpayments		

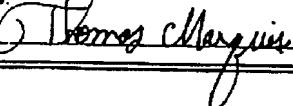
<b>FEE CALCULATION</b>								
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>								
<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>			
	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	
Utility	300	150	500	250	200	100	_____	
Design	200	100	100	50	130	65	_____	
Plant	200	100	300	150	160	80	_____	
Reissue	300	150	500	250	600	300	_____	
Provisional	200	100	0	0	0	0	_____	
<b>2. EXCESS CLAIM FEES</b>								
<b>Fee Description</b>								
Each claim over 20 (including Reissues) _____								
Each independent claim over 3 (including Reissues) _____								
Multiple dependent claims _____								
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>				
HP = highest number of total claims paid for, if greater than 20. _____				<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Small Entity</b>		
<b>Indep. Claims</b>				<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
HP = highest number of independent claims paid for, if greater than 3. _____				_____				
<b>3. APPLICATION SIZE FEE</b>								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Fee (\$)</b>		
- 100 =		/50 =		(round up to a whole number) x		=		
<b>4. OTHER FEE(S)</b>								
Non-English Specification, \$130 fee (no small entity discount) _____								
Other (e.g., late filing surcharge): 1251 Extension for response within first month 1401 Notice of appeal _____								
120.00								
500.00								

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	46,900	Telephone	(206) 262-8900
Name (Print/Type)	Thomas R. Marquis	Date August 20, 2007			

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Dated: 8/20/07

Signature:  (Thomas R. Marquis)